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						_				
Fill	in this information to identify your ca	ase:								
Del	tor 1 Luis Malpica	3			_					
	otor 2 use, if filing)				_					
Uni	ted States Bankruptcy Court for the	: EASTERN DISTRICT	OF PENNSYLVANIA	\						
Cas	se number <b>20-14340</b>					Chec	k if this is	:		
(If kr	own)		-				ın amende	ed filing		
									g postpetition ollowing date:	
0	fficial Form 106I					Ī	MM / DD/ Y	YYYY		
S	chedule I: Your Inc	ome								12/15
	t1: Describe Employment Fill in your employment information.	On the top of any additi	Debtor 1	ur name	and	a case n	·		ling spouse	question
	If you have more than one job,		■ Employed				☐ Employed			
	attach a separate page with information about additional employers.	Employment status	☐ Not employed				☐ Not employed			
		Occupation	Electrician							
	Include part-time, seasonal, or self-employed work.	Employer's name	KEC/IPC							
	Occupation may include student or homemaker, if it applies.	Employer's address	19 W. 44th Street Suite 500 New York, NY 10036			)				
		How long employed t	here? 17 year	s			_			
Par	t 2: Give Details About Mor	nthly Income								
	mate monthly income as of the dause unless you are separated.	ate you file this form. If	you have nothing to re	eport for	any	line, write	e \$0 in the	space. Inc	clude your no	n-filing
	u or your non-filing spouse have mo e space, attach a separate sheet to		ombine the information	n for all e	empl	oyers for	that perso	on on the li	nes below. If	you need
						For Del	btor 1		btor 2 or ng spouse	
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$	8	,796.67	\$	N/A	
3.	Estimate and list monthly overt	ime pay.		3.	+\$		0.00	+\$	N/A	
4.	Calculate gross Income. Add lir	ne 2 + line 3.		4.	\$	8.7	96.67	\$	N/A	

Official Form 106I Schedule I: Your Income page 1

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Debtor 1		Luis Malpica		Case number (if known)		20-14340					
				Fo	r Debtor 1		Debtor filing s	2 or pouse			
	Cop	y line 4 here	4.	\$_	8,796.67	\$		N/A			
5.	List	all payroll deductions:									
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	1,767.91	\$		N/A			
	5b.	Mandatory contributions for retirement plans	5b.	\$	1,300.00	\$		N/A	_		
	5c.	Voluntary contributions for retirement plans	5c.	\$	499.59	\$		N/A	_		
	5d.	Required repayments of retirement fund loans	5d.	\$	0.00	\$		N/A	_		
	5e.	Insurance	5e.	\$	433.33	\$		N/A	_		
	5f.	Domestic support obligations	5f.	\$	0.00	\$		N/A	<u>.</u>		
	5g.	Union dues	5g.	\$	0.00	\$		N/A	<u>.</u>		
	5h.	Other deductions. Specify:	5h.+	\$_	0.00	+ \$		N/A	<u> </u>		
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$_	4,000.83	\$		N/A	<u>.</u>		
7.	Cald	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$_	4,795.84	\$		N/A	<u> </u>		
8.	List 8a.	all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total									
		monthly net income.	8a.	\$_	0.00	\$		N/A	_		
	8b.	Interest and dividends	8b.	\$_	0.00	\$		N/A	<u> </u>		
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$	0.00	\$		N/A			
	8d.	Unemployment compensation	8d.	\$	0.00	\$		N/A			
	8e.	Social Security	8e.	\$	0.00	\$		N/A	<u> </u>		
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:	8f.	\$_	0.00	\$		N/A	<u>.</u>		
	8g.	Pension or retirement income	8g.	\$_	0.00	\$		N/A	_		
	8h.	Other monthly income. Specify: Pro Rated Tax	_ 8h.+	\$_	583.00	+ \$		N/A	<u> </u>		
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$_	583.00	\$		N/	A		
10	Cald	culate monthly income. Add line 7 + line 9.	10. \$		5,378.84 + \$		N/A	= \$	5,378.84		
10.		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.   Ψ		5,376.64 T V		IN/A	= 5 -	3,370.04		
11.	Stat Inclu	e all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your or friends or relatives.  not include any amounts already included in lines 2-10 or amounts that are not a	depen		•	·	chedule 11.		0.00		
12.		the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certainies					12.	\$	5,378.84		
10	Do you expect an increase or decrease within the year offer you file this form?								Combined monthly income		
13.	י סט <u>י</u>	/ou expect an increase or decrease within the year after you file this form No.	ſ								
		No. Yes Explain:									